## **FEC** FORM 3

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

For An Authorized Committee			Off	Office Use Only	
1. NAME OF COMMITTEE (in full) USE FEC MOR TYPE O		mple:If typing, type r the lines			
Engel for Congress				<u> </u>	
ADDRESS (number and street) 462 Cali	fornia Road				
Check if different than previously reported. (ACC)					
	e <sub></sub>		NY L	10708	
2. FEC IDENTIFICATION NUMBER   **Text	CITY 🛕		STATE	ZIP CODE ▲  STATE ▼ DISTRICT	
C00236513	3. IS THIS REPORT	X NEW (N) OR	AMENDED (A)		
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Q1)  July 15 Quarterly Report (Q2)  October 15 Quarterly Report (Q3)	(b) 12-Day PRE	-Election Report for the: Primary (12P) Convention (12C)	X General (12G		
	B) Election on	11 07	2006	in the NY State of	
January 31 Year-End Report (YE	(c) 30-Day <b>POS</b>	<b>T</b> -Election Report for the	:		
		General (30G)	Runoff (30R)	Special (30S)	
Termination Report (TER)	Election on			in the State of	
5. Covering Period 1 0 1	2006	through 1 (	18	2006	
I certify that I have examined this Report and to  Type or Print Name of Treasurer  Arn	the best of my knowledge old Linhardt	and belief it is true, corre	ect and complete.		
Signature of Treasurer Electronically Filed b	y Arnold Linhardt		Date 1 0	26 2006	
NOTE : Submission of false, erroneous, or inco	omplete information may su	ubject the person signing	this Report to the pen	nalties of 2 U.S.C 437g.	
Office Use Only				FEC FORM 3 (Revised 02/2003)	